

EXECUTIVE COUNCIL OF IOWA

AGENDA

JANUARY 3, 2012

1. Introduction of Attendees
2. Approval of minutes of meeting held December 21, 2011
3. Personal Appearance –
 - A. David Vaudt, State Auditor will request a new membership in AICPA Governmental Audit Quality Center for one year in the amount of \$275.00
TAB # 1
 - B. Carlene Russell, Department on Aging will be present to request new memberships in the following:
 1. American Society on Aging for one year in the amount of \$205.00
 2. National Academy for State Health Policy for one year in the amount of \$175.00.TAB #'s 2 & 3
 - C. Jude Igbokwe, Iowa Workforce Development will be present to request a new membership in International Economic Development Council for one year in the amount of \$1,075.00
TAB # 4
4. Outside CPA Firm - Page 1
TAB # 5
5. Outside Counsel – Page 1
TAB # 6
6. Leases – Page 1
7. Emergency Allocations – Page 1
8. Payment of Cost Items – Pages 1 - 4
9. Renewal Memberships – Pages 4 – 7
TAB #'s 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17 and 18

4. Outside CPA Firm

- A. Request from David A. Vaudt, Auditor of State to employ the services of KPMG LLP, to perform the audit of the Iowa Fund of Funds, Fund A for the year ending December 31, 2011. The total reimbursement shall not be for more than \$9,920.00.

TAB # 5

5. Outside Counsel

- A. The Department of Justice, Attorney General's office requests approval to amend the current contract with Belin Law firm to substitute Weinhardt & Logan and to add Ms. Danielle Shelton at the rate of \$210.00 per hour.

TAB # 6

6. Leases

- A. Lease between DNR and Blackhawk Fleet, LLC subsidiary of Marquette Transportation Company Buffalo, IA
Date of Lease: Five years ending December 31, 2016
Legal Description: A parcel 650 feet long by 200 feet wide located in Section 19, Township 77 North, Range 2 East, Scott County, Iowa, at Mississippi River Mile 469.5.
Annual Fee: \$6,826.00

David Dorff, Assistant Attorney General, has reviewed the above lease and approved the lease as to form.

7. Emergency Allocations

- A. Department of Natural Resources is requesting an emergency allocation in the amount of \$15,561.35 On July 22, 2011 damage to a storage building at Wapsipinicon State Park in Jones County was caused by wind damage due to a falling tree. Request is to cover repair costs.

The State Auditor's office has review the request and recommends allocation, subject to audit of actual invoices.

8. Payment of Cost Items

- A. Dorsey & Whitney, LLP\$5,400.64
P.O. Box 1680
Minneapolis MN 55480-1680
Community Development Div. of the Department of Economic Development

Julie Pottorff, Deputy Attorney General, has reviewed invoice and recommends payment. Payment will be made from the DED.

- B. Wandro & McCarthy, P.C.\$1,825.00
2501 Grand Avenue, Suite B
Des Moines, IA 50312
Unclaimed Property Probate Matters

Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment. Payment will be made from the funds of the Unclaimed Property Fund.

- C. Shuttleworth and Ingersoll, P.L.C..... \$7,430.12
115 3rd Street South East
Suite 500
Cedar Rapids, IA 52401
Mills v. Iowa Board of Regents et al., an employment termination case

Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment. Payment will be made both from the General Fund (\$80.00 per hour) and by the Board of Regents (\$95.00 per hour plus expenses).

- D. Coppola, McConville, Coppola, Hockenberg & Scalise, P.C.....\$5,000.00
2100 Westown Parkway, Suite 210
West Des Moines, IA 50265-1539
Mortgage Industry Practices

Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment. Payment will be made from the Consumer Litigation and Education Fund.

- E. Davis, Brown, Koehn, Shors & Roberts, P.C.....\$261.00
The Davis Brown Tower
215 10th Street, Suite 1300
Des Moines, IA 50309-3993
Legal Services to state agencies on issues related to the visa status of prospective state employees

Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment. Payment will be made from the funds of the Iowa Economic Development Authority.

- F. Dow, Lohnes PLLC.....\$5,153.74
1200 New Hampshire Ave NW Suite 800
Washington, DC 20036
Iowa Public Television

Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment. Payment will be made from the funds of Iowa Public Television.

- G. Nyemaster, Goode, West, Hansell & O'Brien, P.C.....\$6,164.70
700 Walnut Street
Suite 1600
Des Moines, IA 50309
Collections of Accounts in Court

Julie Pottorff, Deputy Attorney General, has reviewed these invoices and recommends payment. Payment will be made from the funds of the Department of Economic Development

- H. Dorsey & Whitney.....\$522.00
801 Grand Avenue, Suite 3900
Des Moines, IA 50309
2009-2010 Series of I-Jobs Bonds

Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment. Payment will be made from the Revenue Bonds Debt Service Fund.

- I. Nyemaster, Goode, West Hansell & O'Brien, P.C.\$201.50
700 Walnut, Suite 1600
Des Moines, IA 50309
Central Iowa Construction Trades Council et al. v. Branstad et al, No. 4:11-cv-202, a suit in federal court challenging Executive Order No. 69

Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment.

- J. Nyemaster, Goode, West Hansell & O'Brien, P.C.\$12,681.50
700 Walnut, Suite 1600
Des Moines, IA 50309
Homan, Dotzler, Hunter, Jacoby, Running-Marquardt, and Beall v. Terry E. Branstad

Julie Pottorff, Deputy Attorney General, has reviewed this invoice and recommends payment.

- K. Patterson Law Firm L.L.P..... \$199.50
729 Insurance Exchange Building
505 Fifth Avenue
Des Moines, IA 50309-2390
David Ozolins v. University of Iowa and Second Injury Fund of Iowa

- L. Patterson Law Firm L.L.P..... \$184.00
 729 Insurance Exchange Building
 505 Fifth Avenue
 Des Moines, IA 50309-2390
Jesadae Lafella v. Iowa Medical & Classification Center, State of Iowa and
 Second Injury Fund
- M. Patterson Law Firm L.L.P..... \$121.50
 729 Insurance Exchange Building
 505 Fifth Avenue
 Des Moines, IA 50309-2390
Maureen Kimmerle v. State of Iowa and Second Injury Fund
- N. Patterson Law Firm L.L.P..... \$279.50
 729 Insurance Exchange Building
 505 Fifth Avenue
 Des Moines, IA 50309-2390
Dirk Marple v. University of Iowa Hospitals and Clinics, State of Iowa and
 Second Injury Fund.

Julie Pottorff, Deputy Attorney General, has reviewed these invoices and recommends payments.

9. **Renewal Memberships**

- A. Cultural Affairs in National Council of State Historic Preservation Offices in the amount of \$ 6,301.00 for January 1 - December 31, 2012. (Previous amount was \$ 6,279.00.) Other agencies: No: Funding Source: State General Fund (76%) Federal Funds (24%)
TAB # 7
- B. Department on Aging in National Academy of Elder Law Attorneys (NAELA) in the amount of \$225.00 for January 1 - December 31, 2012. (Previous amount was \$225.00.) Other agencies: No: Funding Source: State General Fund (71%) Federal Funds (29%)
- C. Economic Development in Business Retention & Expansion International (BREI) in the amount of \$255.00 for January 1 - December 31, 2012. (Previous amount was \$255.00.) Other agencies: No: Funding Source: State General Fund
- D. Economic Development in Professional Developers of Iowa (PDI) in the amount of \$1,450.00 for January 1 - December 31, 2012. (Previous amount was \$2,280.00.) Other agencies: Yes: IWD Funding Source: State General Fund
TAB # 8

- E. Education in American Library Association in the amount of \$3,040.00 for December 1, 2011 - November 30, 2012. (Previous amount was \$2,975.00.) Other agencies: No: Funding Source: Federal Funds

TAB # 9

- F. Education in Association for Informational Media and Equipment in the amount of \$150.00 for December 31, 2011 - December 31, 2012. (Previous amount was \$150.00.) Other agencies: No: Funding Source: Federal Funds
- G. Education in National Association of State Approving Agencies in the amount of \$500.00 for July 1, 2011 - June 30, 2012. (Previous amount was \$500.00.) Other agencies: No: Funding Source: Federal Funds
- H. Health in Association of State and Territorial Public Health Nutrition Directors (ASTPHND) in the amount of \$400.00 for January 1 - December 31, 2012. (Previous amount was \$400.00.) Other agencies: No: Funding Source: Federal Funds
- I. Health in Association of State and Territorial Dental Directors (ASTDD) in the amount of \$100.00 for January 1 - December 31, 2012. (Previous amount was \$100.00.) Other agencies: No: Funding Source: State General Fund
- J. Health in National Association for Public Health Statistics and Information Systems (NAPHSIS) in the amount of \$2,450.00 for January 1 - December 31, 2012. (Previous amount was \$2,450.00.) Other agencies: No: Funding Source: Other Funds: Retained Fees

TAB # 10

- K. Human Rights in National Association for State Community Services Programs in the amount of \$3,876.17 for January 1 - December 31, 2012. (Previous amount was \$3,876.17.) Other agencies: No: Funding Source: Federal Funds

TAB # 11

- L. Human Services in American Public Human Services Association (APHSA) in the amount of \$22,120.00 for January 1 - December 31, 2012. (Previous amount was \$20,584.00.) Other agencies: No: Funding Source: State General Fund

TAB # 12

- M. Inspections and Appeals in Association of Racing Commissioners International (ARCI) in the amount of \$5,000.00 for January 1 - December 31, 2012. (Previous amount was \$5,000.00.) Other agencies: No: Funding Source: Other Funds: Gaming Regulatory Revolving Fund

TAB # 13

- N. Iowa Finance Authority in Iowa Commercial Real Estate Association in the amount of \$85.00 for January 1 - December 31, 2012. (Previous amount was \$85.00.) Other agencies: No: Funding Source: Other Funds: Self-Funded
- O. Iowa Public Television in Iowa Broadcasters Association in the amount of \$267.00 for January 1 - December 31, 2012. (Previous amount was \$254.00.) Other agencies: No: Funding Source: Other Funds: CPB Funds
- P. IPERS in Association for Information and Image Management International (AIIM) in the amount of \$99.00 for January 1 - December 31, 2012. (Previous amount was \$125.00.) Other agencies: No: Funding Source: Other Funds: IPERS Appropriation Fund
- Q. IPERS in Council of Institutional Investors in the amount of \$30,000.00 for January 1 - December 31, 2012. (Previous amount was \$25,841.40.) Other agencies: No: Funding Source: Other Funds: IPERS Trust Fund

TAB # 14

- R. IPERS in International Foundation for Retirement Education (InFRE) in the amount of \$875.00 for September 30, 2011 - September 30, 2012. (Previous amount was \$775.00.) Other agencies: No: Funding Source: Other Funds: IPERS Trust Fund

TAB # 15

- S. IPERS in International Foundation of Employee Benefit Plans (IFEBP) in the amount of \$755.00 for January 1 - December 31, 2012. (Previous amount was \$740.00.) Other agencies: No: Funding Source: Other Funds: IPERS Appropriation Fund
- T. IPERS in National Association of Public Pension Attorneys in the amount of \$700.00 for January 1 - December 31, 2012. (Previous amount was \$585.00.) Other agencies: No: Funding Source: Other Funds: IPERS Trust Fund

- U. IPERS in National Council on Teacher Retirements (NCTR) in the amount of \$3,000.00 for January 1 - December 31, 2012. (Previous amount was \$2,900.00.) Other agencies: No: Funding Source: Other Funds: IPERS Trust Fund

TAB # 16

- V. IPERS in National Institute on Retirement Security (NIRS) in the amount of \$5,000.00 for January 1 - December 31, 2012. (Previous amount was \$2,500.00.) Other agencies: No: Funding Source: Other Funds: IPERS Trust Fund

TAB # 17

- W. IPERS in Public Retirement Information Systems Management in the amount of \$150.00 for January 1 - December 31, 2012. (Previous amount was \$150.00.) Other agencies: No: Funding Source: Other Funds: IPERS Trust Fund
- X. Public Defense in International Interior Design Association (IIDA) in the amount of \$465.00 for January 1 - December 31, 2012. (Previous amount was \$465.00.) Other agencies: No: Funding Source: Federal Funds
- Y. Public Safety in Association of Public Safety Communications Officials (APCO) in the amount of \$92.00 for January 1 - December 31, 2012. (Previous amount was \$92.00.) Other agencies: Yes: DOT Funding Source: State General Fund
- Z. Public Safety in United States Police Canine Association in the amount of \$40.00 for January 1 - December 31, 2012. (Previous amount was \$40.00.) Other agencies: No: Funding Source: State General Fund
- AA. Vocational Rehabilitation in Greater Cedar Valley Alliance & Chamber in the amount of \$60.00 for January 1 - December 31, 2012. On November 21, 2011 Council approved \$160.00 for this membership. The actual amount should have been \$220.00. This request is for the additional funds that are due. Other agencies: Yes: IWD Funding Source: State General Fund (21%) Federal Funds (79%)

TAB # 18

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

TAB # 1

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Office of Auditor of State

NAME OF ORGANIZATION: AICPA Governmental Audit Quality Center

NEW MEMBERSHIP ☒ **RENEWAL** ☐ **MEMBERSHIP PERIOD:** 9/1/11-8/31/12
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$ 275.00

Funding Source: State General Fund ☒ **Other State Funds** ☐
Federal Funds ☐ **Other Funds** ☐

If Renewal, previous year amount. \$ _____

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ **Yes** ☒ **No**

If yes, please list:

Please describe why your department should have an additional membership.

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? ☐ **Yes** ☒ **No**
If yes, list the anticipated number of trips per year and their purpose:

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT.

The Governmental Audit Quality Center is a resource devoted to supporting the performance of audits of governmental units which meet the professional and legal requirements of those audits.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

Ongoing access to this resource will assist in ensuring our staff is adequately trained to perform audits and review the audit work performed by CPA firms, as well as providing training to CPA firms.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION:

Contact will primarily be through the internet and the frequency will vary according to need.

Requested by: David A. Anderson **Date:** December 20, 2011
(Department Head Signature)

Phone: 515-281-5835 **E-mail:** nancy.anderson@auditor.state.ia.us

Membership Form 42400

July 2009

DOM: ☒ **Approval** ☐ **Disapproval** ☐

Signature _____ **Date** _____

2011 DEC 20 PM 2:23

Executive Council of Iowa

TAB # 2

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

RECEIVED

DEC 15 2011

IOWA DEPT. OF
MANAGEMENT

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Department on Aging

NAME OF ORGANIZATION: American Society on Aging

NEW MEMBERSHIP ☒ **RENEWAL** ☐ **MEMBERSHIP PERIOD:** 11.2011 to 11.2012
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$205.

If Renewal, previous year amount. _____

FUNDING SOURCE: State General Fund ☒ 71% **Other State Funds** ☐ _____

Federal Funds ☒ 29% **Other Funds** ☐ _____ **If Renewal, previous year amount \$** _____

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ **Yes** ☒ **No** **If yes, please list:**

WILL THIS MEMBERSHIP REQUIRE OUT-OF-STATE TRAVEL? ☒ **Yes** ☐ **No**

If yes, list the anticipated number of trips per year and their purpose: One. Attendance to the 2012 Annual Conference of the American Society on Aging the largest gathering of a diverse, multidisciplinary community of professionals from the fields of aging, healthcare and education, along with business leaders from across the United States.

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT.
Required for Aging in American Leadership Academy

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL ADVANCE GOALS FOR YOUR DEPARTMENT SET BY THE COUNCIL ON HUMAN INVESTMENT
Membership will allow for commitment to skills of those who seek to improve the quality of life of older adults and their families, and participation in the Leadership Academy that facilitates those goals.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION:
With a major commitment to diversity and inclusion, membership puts the Department in touch with a diverse array of professionals in the field of aging working along the continuum of care and service and who are concerned with the physical, emotional, social, economic and spiritual well-being of older adults.

Requested by: Donna K. Harvey
Donna Harvey

Date: 12/13/2011

Phone: 515-725-3302

E-mail: donna.harvey@iowa.gov

DOM: **APPROVAL** ☒ **DISAPPROVAL** ☐

Signature [Signature]

Date 12/18/11

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

TAB # 3

RECEIVED

DEC 15 2011

IOWA DEPT. OF
MANAGEMENT

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Department on Aging

NAME OF ORGANIZATION: National Academy for State Health Policy

NEW MEMBERSHIP ☒ **RENEWAL** ☐

MEMBERSHIP PERIOD: 1/2012 to 12/2012
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT 175.00

FUNDING SOURCE: State General Fund ☒ 71% Other State Funds ☐

Federal Funds ☒ 29 Other Funds ☐ _____ **If Renewal, previous year amount \$** _____

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ **Yes** ☒ **No** **If yes, please list:**

WILL THIS MEMBERSHIP REQUIRE OUT-OF-STATE TRAVEL? ☐ **Yes** ☒ **No**
If yes, list the anticipated number of trips per year and their purpose:

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT.

The National Academy for State Health Policy will aid the Department with up-to-date health policy matters and funding opportunities. It offers networking, educational opportunities and professional support.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL ADVANCE GOALS FOR YOUR DEPARTMENT SET BY THE COUNCIL ON HUMAN INVESTMENT

This national health policy membership will aid in obtaining timely, experience-based information and assistance.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION:

Newsletters, health publications, website accessibility to members only, topic-specific interest group networking, and access to datebases.

Requested by:

Donna K. Harvey
Donna Harvey

Date: 12/13/2011

Phone: 515-725-3302

E-mail: donna.harvey@iowa.gov

DOM:

APPROVAL ☒

DISAPPROVAL ☐

Signature:

David J. [Signature]

Date

12/18/11

JW
12/20/11

Executive Council of Iowa
 Capitol Building
 Des Moines, Iowa 50319
 Phone: 515 281-5368
 FAX: 515 281-7562

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Iowa Workforce Development

NAME OF ORGANIZATION: International Economic Development Council

NEW MEMBERSHIP ☒ RENEWAL ☐ MEMBERSHIP PERIOD: 01-01-2012 to 12-31-2012
 (Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$ 1075.00 (agency membership - 4)

Funding Source: State General Fund ☐ Other State Funds ☐
 Federal Funds ☒ Other Funds ☐

If Renewal, previous year amount. \$ 1,075.00

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☒ Yes ☐ No

If yes, please list: Iowa Department of Economic Development

Please describe why your department should have an additional membership _____

See Description below in why this membership is important to our department

WILL THIS MEMBERSHIP REQUIRE AND PAY for OUT-OF-STATE TRAVEL? Yes ☐ No ☒

If yes, list the anticipated number of trips per year and their purpose: _____

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT:

Laborshed Studies, Dislocated Worker Survey & Analysis, Skillshed Analyses, and Fringe Benefit Profiles are revenue generating products. Our customer is community economic developers who are members of Professional Developers of Iowa. Without membership with this organization, IWD will have difficulty establishing a relationship with our customer. Economic development officials use these tools as part of their attraction/recruitment efforts by providing workforce characteristics, skills gaps, commuting patterns, and benefits/wages.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA. Membership in this organization connects IWD to our community customers and gives the department national and international opportunities. Feedback and input from our customers assists in product improvement to assist in further expanding Iowa's economic and workforce base - business retention and prospective new business efforts.

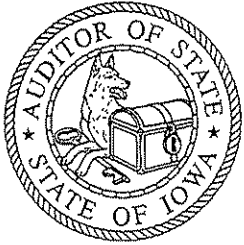
DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: Membership in this organization provides the necessary contact to all economic developers across the state and nation. IWD has daily contact with members of this organization. This organization hold conferences and invites IWD to participate in presentations. IWD staff have presented information regarding Laborshed Studies, Fringe Benefits, Job Vacancies, Educational Outcomes, Skillshed Analyses and other workforce information.

Requested by: Laura Wallert Date: 12-20-11
 (Department Head Signature)

Phone: _____ E-mail: _____

DOM: Approval ☒ Disapproval ☐

Signature: [Signature] Date: 12/23/11



OFFICE OF AUDITOR OF STATE TAB # 5
STATE OF IOWA

David A. Vaudt, CPA
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004

Telephone (515) 281-5834 Facsimile (515) 242-6134

December 19, 2011

GeorgAnna Madsen, Secretary
Executive Council of Iowa
State Capitol Building
LOCAL

Dear GeorgAnna:

I respectfully request permission of the Executive Council to employ the services of KPMG LLP, to perform the audit of the Iowa Fund of Funds, Fund A for the year ending December 31, 2011.

The total reimbursement for the audit shall not be for more than \$9,920. A copy of the Agreement is attached.

Your prompt attention to this matter will be greatly appreciated. Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Dave".

David A. Vaudt

DAV/gjp

2011 DEC 20 PM 9:50



EXECUTIVE SECRETARY
THOMAS J. MILLER
ATTORNEY GENERAL
801 DEC 28 AM 9:37

JULIE F. POTTORFF
DEPUTY ATTORNEY GENERAL

Iowa Department of Justice

Address Reply To:
1305 E. Walnut Street
Des Moines, Iowa 50319
Telephone: 515/281-3349
Fax: 515/281-4209
Julie.Pottorff@iowa.gov

December 27, 2011

GeorgAnna Madsen
Executive Secretary
State Capitol
L-O-C-A-L

Re: Retention of Special Counsel

Dear GeorgAnna:

Since 2005, our office has had a contract with the Belin firm and Mark Weinhardt as special counsel to defend the Department of Human Services (DHS) in NevadaCare, Inc. v. Department of Human Services and Kevin W. Concannon, a state court suit alleging that DHS engaged in an inequitable distribution of enrollees between the managed care program and the fee-for-service system under Medicaid. Our office is requesting an amendment to the current contract for special counsel to accommodate Mark Reinhardt who has now left the Belin firm.

The suit sought a recalculation of capitation rates and monetary damages that could have reached \$100 million. In the fall of 2007 the district court entered judgment for DHS and ordered payment of \$1,942,912.20 in attorney fees and costs by the plaintiff to DHS which would have reimbursed DHS for the expense of the defense. On appeal last spring the Iowa Supreme Court affirmed the judgment for DHS, but reversed the award of attorney fees and costs and remanded the case back to the Polk County District Court to recalculate the award in light of its decision that not all of the annual contracts with NevadaCare included a provision for reimbursement of attorney fees and costs. A hearing on recalculation of the attorney fees and costs is pending.

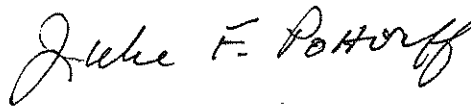
Meanwhile, Mark Weinhardt has left the Belin firm and established the new firm of Weinhardt & Logan, 2600 Grand Avenue, Suite 210, Des Moines, Iowa, 50312. DHS would like Mr. Weinhardt to continue to handle the case on remand. In order to continue representation with Mr. Weinhardt, it will be necessary to amend the current contract to

GeorgAnna Madsen
Executive Secretary
Page 2

substitute Weinhardt & Logan for the Belin firm. The hourly rate for Mr. Weinhardt will remain at \$285 per hour, the rate that has been in effect since 2007. In addition, Mr. Weinhardt would like to add to the contract Ms. Danielle Shelton to be paid at the rate of \$210 per hour. Attorney fees and costs have been and will continue to be paid from Medicaid funds pending a final order on payment of attorneys fees and costs by the plaintiff.

Accordingly, our office requests approval to amend the contract to substitute Weinhardt & Logan for the Belin firm and to add Ms. Danielle Shelton at the rate of \$210 per hour.

Sincerely,

A handwritten signature in cursive script, reading "Julie F. Pottorff".

JULIE F. POTTORFF
Deputy Attorney General

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

REQUEST FOR MEMBERSHIP APPROVAL**DEPARTMENT REQUESTING MEMBERSHIP:** Cultural Affairs**NAME OF ORGANIZATION:** National Council of State Historic Preservation Offices

NEW MEMBERSHIP ☐ **RENEWAL** ☒ **MEMBERSHIP PERIOD:** 01/01/12 - 12/31/31
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$ 4801 (state) \$1500 (federal) = \$6301

If Renewal, previous year amount. \$ 6279

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ Yes ☒ No

If yes, please list:

Please describe why your department should have an additional membership

WILL THIS MEMBERSHIP REQUIRE OUT-OF-STATE TRAVEL? ☐ Yes ☒ No

If yes, list the anticipated number of trips per year and their purpose:

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT.

NCSHPO represents state historic preservation offices across the nation on negotiating nationwide programmatic agreements with federal agencies, tracks federal preservation legislation, and solicits and represents our views on how the agreements and legislation will impact historic preservation activities in our state. Their efforts have an impact on the day-to-day operations of Iowa's State Historic Preservation Office and our ability to meet the state's responsibilities under the National Historic Preservation Act.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

NCSHPO's work directly impacts the federal legislation and appropriations for preservation efforts across the state, including the Historic Preservation Fund appropriation, which is the primary source of funding for Iowa's State Historic Preservation Office. NCSHPO also works on behalf of Iowa's taxpayers. They were instrumental in securing an increase in the federal historic rehabilitation tax credit (from 20% to 26% of qualified rehab costs) for disaster recovery work following the 2008 disasters. They are currently working to extend that benefit beyond its sunset of December 31, 2011. Without the contact membership in NCSHPO provides, Iowa may not receive their support in similar efforts.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: We have daily contact with the organization's members through email communications. Personal contacts with the NCSHPO staff average two to three times per month.

Requested by: _____

(Department Head Signature)

Date: _____

Phone: _____

E-mail: _____

Anita

Executive Council of Iowa
 Capitol Building
 Des Moines, Iowa 50319
 Phone: 515 281-5368 / FAX: 515 281-7562

DOM 12/20/2011

REQUEST FOR MEMBERSHIP APPROVALDEPARTMENT REQUESTING MEMBERSHIP: Iowa Economic Development AuthorityNAME OF ORGANIZATION: Professional Developers of Iowa (PDI)NEW MEMBERSHIP ☐ RENEWAL ☒ MEMBERSHIP PERIOD: 01/01/2012 to 12/31/2012
 (begin and end dates)MEMBERSHIP FEE OR DUES AMOUNT \$ 1450.00Funding Source: State General Fund ☒ Other State Funds ☐Federal Funds ☐ Other Funds ☐If Renewal, previous year amount. \$ 2280.00DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ Yes ☐ No If yes, please list:

N/A

Please describe why your department should have an additional membership

The relationship IEDA has with PDI is valuable to our work through partnerships, local conferences & informational forums. Due to budget conditions, we have minimized membership again.

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? ☐ Yes ☒ No
 If yes, list the anticipated number of trips per year and their purpose:

N/A

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT:

IEDA partners with private & local economic developers for purpose of development of the economic base for IA. PDI members are key partners with IEDA in enhancing the State of IA. IEDA staff as PDI members receive discounts to many conferences, meetings etc.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

Membership provides IEDA to exchange ideas/development techniques with professionals statewide to enhance economic bases for the State of IA. Using collective expertise the members also provide guidance, direction to policymakers.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION:

PDI holds several events through-out the calendar year through conferences, training sessions, meetings, and various mailings, etc.

IDED Division Head: Debra Date: 12/16/11IDED Director or Deputy: Debra Date: 12/16/11Phone: 515-725-3022 E-Mail: anita.lemons@iowa.gov**DOM USE ONLY:**Approve ☒ Disapprove ☐DOM Signature Anita Lemons Date 12/23/11

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

RECEIVED

DEC 21 2011

IOWA DEPT. OF
MANAGEMENT**REQUEST FOR MEMBERSHIP APPROVAL**DEPARTMENT REQUESTING MEMBERSHIP: *Education, State Library of Iowa*NAME OF ORGANIZATION *American Library Association*NEW MEMBERSHIP ☐ RENEWAL ☒ MEMBERSHIP PERIOD: *12/01/11 to 11/30/12*
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$3,040.00

Funding Source: State General Fund ☐ Other State Funds ☐Federal Funds ☒ Other Funds ☐

If Renewal, previous year amount. \$ 2,975.00

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ Yes ☒ No

If yes, please list: _____

Please describe why your department should have an additional membership _____

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? ☐ Yes ☒ NoIf yes, list the anticipated number of trips per year and their purpose: *The American Library Association holds two national conferences per year; attendance by members is encouraged but not required.***DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT:**

Membership in ALA makes it possible to subscribe to professional library science journals published by ALA, which are used by Iowa librarians as well as State Library staff. ALA membership also provides high-quality continuing education opportunities to State Library professional library staff, so they can stay abreast of new developments in their field.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

State Library membership in ALA benefits the taxpayers of Iowa by assisting the State Library in its mission of promoting excellence in library services in Iowa.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: *Contact by email or telephone at least monthly.*

Requested by: <i>[Signature]</i> (Department Head Signature)	Date: <i>12/19/14</i>
Phone: <i>281-3965</i>	E-mail: <i>jeff.berge@iowa.gov</i>

Membership Form 42400

July 2009

DOM: Approval ☒ Disapproval ☐Signature *[Signature]* Date *12/23/11*

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

REQUEST FOR MEMBERSHIP APPROVALDEPARTMENT REQUESTING MEMBERSHIP: Public HealthNAME OF ORGANIZATION: National Association for Public Health Statistics and Information Systems(NAPHSIS)NEW MEMBERSHIP ☐ RENEWAL ☒ MEMBERSHIP PERIOD: 1/1/2012 - 12/31/2012 ✓
(Beginning and ending dates)MEMBERSHIP FEE OR DUES AMOUNT \$ 2450.00 ✓Funding Source: State General Fund Other State Funds _____Federal Funds _____ Other Funds ☒ 0024-588-0024 Retained feesIf Renewal, previous year amount. \$ 2450.00 / _____DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ Yes ☒ No

If yes, please list: _____

Please describe why your department should have an additional membership _____

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? ☐ Yes ☒ No

If yes, list the anticipated number of trips per year and their purpose: _____

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT: Assessment and Statistics are core functions for public health practice. This organization assists in establishing standards for data collection, analysis, and dissemination. NAPHSIS negotiates on behalf of its members the amount and terms of the Vital Statistics Cooperative Program (VSCP) contract with the National Center for Health Statistics (NCHS) for the purchase of vital statistics data. NAPHSIS has been successful in procuring additional funding to support the VSCP contract which means continued funding for Iowa.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA. NAPHSIS has developed and implemented two computer systems used by states to enable us to meet our federal contractual obligations for national data provisions. If we are not a member of this association, we will be required to pay a fee for the usage of this system (the annual fee will be more than the cost of the yearly membership).

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: The organization provides regular information regarding the contract negotiations with the National Center for Health Statistics and other issues regarding statistics, including fraud prevention information which reduces the threat of citizens using fraudulent documents when obtaining state services(i.e. Driver's License, Medicaid, etc.).

Requested by: Dr Miller checks by Mspangler 12-21-11

(Department Head Signature)
Phone: _____ E-mail: _____

* Executive Council - Please send correspondence to the attention of Marisa Spangler. Thank you.
Membership Form 42400

DOM: Approval ☒ Disapproval ☐ 12/27/11

Executive Council of Iowa

TAB # 11

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DEC 09 2011

Capitol Building
Des Moines, Iowa 50319
Phone: 515-281-5368
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IOWA DEPT. OF
MANAGEMENT

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Human Rights/Division of Community Action Agencies

NAME OF ORGANIZATION: National Association for State Community Services Programs

NEW MEMBERSHIP _____ **RENEWAL** ☒ **MEMBERSHIP PERIOD:** 1/1/12 to 12/31/12

MEMBERSHIP FEE OR DUES AMOUNT: \$1,895.05 CSBG & \$1,981.12 WX - Total \$3,876.17

Funding Source: State General Fund ☐ Other State Funds ☐ _____

Federal Funds ☐ **Other Funds** ☐ _____

If Renewal, previous year amount: \$1,895.05 CSBG & \$1,981.12 WX - Total \$3,876.17

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ Yes ☒ No

If yes, please list: _____

Please describe why your department should have an additional membership _____

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? ☐ Yes ☐ No

If yes, list the anticipated number of trips per year and their purpose: Normally we attend the annual training seminar held in the fall of the year. The membership does not pay for the out of state travel. Mr. Brand serves as the Vice President of the association and Ms. Howe is a Board member representing Region VII.

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT:

NASCSP offers training seminars providing continuing education in the CSBG, DOE/WAP Programs from the national perspective. They offer a chance for direct person-to-person contact and interaction with peers and federal program officials from DOE and HHS.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA: NASCSP works in close cooperation with the Office of Community Services on the Monitoring and Assessment Task force. This group developed the Results Oriented Management Assessment which will assist Iowa in reporting its targeted performance measures.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACT YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: We receive monthly newsletters and seek guidance and technical assistance from them on other issues at least on a monthly basis.

Membership Form 42400

Requested by: [Signature]
(Department Head Signature)

Date: 12/05/11

Phone: 281-3268 (Bill Brand)

E-mail: Bill.Brand@iowa.gov

DOM

Approval ☒ **Disapproval** ☐

Signature

[Signature]

Date

12/20/11

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
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TAB # 12

RECEIVED

DEC 21 2011

IOWA DEPT. OF
MANAGEMENT

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Human Services

NAME OF ORGANIZATION: American Public Human Services Association (APHSA)

NEW MEMBERSHIP ☐ RENEWAL ☒ MEMBERSHIP PERIOD: 1/1/12 - 12/31/12
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$ 22,120.00 401-5702-2810
OK 12/21/11

Funding Source: State General Fund ☒ Other State Funds ☐
Federal Funds ☐ Other Funds ☐

If Renewal, previous year amount. \$ 20,584.00

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ Yes ☒ No

If yes, please list: _____

Please describe why your department should have an additional membership _____

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? ☐ Yes ☒ No

If yes, list the anticipated number of trips per year and their purpose: _____

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT.

The association is an effective advocate for the concerns of state agencies and represents state human service agencies in dialogue with federal officials as well as Congress members on human services policy development and implementation.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

APHSA serves as a voice at the national level for those of us who plan, direct, and deliver public human services.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: Regular contact both in person, by conference call, and email. Various APHSA publications are received by the Department and shared with staff. In addition, APHSA conducts quarterly and annual meetings, which staff may attend.

Requested by: C. M. Polman Date: 12-16-11
(Department Head Signature)

Phone: _____

DOM: Approval ☒ Disapproval ☐

Signature [Signature] Date 12/23/11

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515-281-5368
FAX: 515-281-7562

TAB # 13

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Inspections and Appeals – Racing & Gaming Commission (IRGC)

NAME OF ORGANIZATION: Association of Racing Commissioners International (ARCI)

NEW MEMBERSHIP RENEWAL ☒ MEMBERSHIP PERIOD: 1/1/12 – 12/31/12
(Beginning and ending dates)

MEMBERSHIP FEES OR DUES AMOUNT \$ 5,000.00

Funding Source: State General Fund Other State Funds ☐
Federal Funds ☐ Other Funds ☒ Gaming Regulatory Revolving Fund

NOTE: The General Fund is reimbursed 100% by the regulatory fees paid by the tracks and boats.
If Renewal, previous year amount. \$5,000.00

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? ☐ Yes ☒ No
If yes, please list: _____

Please describe why your department should have an additional membership _____

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? ☒ Yes ☐ No
If yes, list the anticipated number of trips per year and their purpose: IRGC will send (a) representative(s) to the annual conference held in different locations each year.

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT:

ARCI provides invaluable support to its member pari-mutuel racing commissions throughout North America. The IRGC is able to gain access to licensing and ruling information from all member jurisdictions held in the ARCI databases, which is essential for IRGC to make eligibility decisions of individuals from other states. This membership also gives IRGC access to a listing of horses on lasix, vet lists, and ruled off greyhounds. Regulation of pari-mutuel racing would be significantly compromised if the ARCI membership were not renewed.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

The wagering public would justifiably lack confidence in the integrity of racing conducted in Iowa without the above described access to key information. Individuals who have been denied a license, had their license suspended or revoked, or are otherwise in bad standing in another jurisdiction, would be free to obtain a license and participate in racing in Iowa. IRGC staff would not have access to this information in screening potential participants without the membership.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION:

Daily use during live racing through electronic communication.

Requested by: <u>Rod Roberts</u> (Department Head Signature)	Date: <u>12-13-11</u>
Phone: <u>515-281-5457</u>	E-mail: <u>Rod.roberts@dia.iowa.gov</u>

Membership Form 42400

July 2009

DOM: Approval ☒ Disapproval ☐

Signature: [Signature] Date: 12/20/11

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

TAB # 14

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: IPERS

NAME OF ORGANIZATION: Council of Institutional Investors

NEW MEMBERSHIP ☐ **RENEWAL** ☒ **MEMBERSHIP PERIOD:** 01/01/12 thru 12/31/12
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$ 30,000.00

Funding Other Funds 100 % IPERS Trust Fund

If Renewal, previous year amount. \$ 25,841.40

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? Yes No ☒ Unknown

If yes, please list:

Please describe why your department should have an additional membership N/A

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? Yes ☒ No ☐

If yes, list the anticipated number of trips per year and their purpose:

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT:

Membership in CII provides several important benefits to IPERS. First, CII serves as the unified voice of most large institutional investors in matters related to corporate management and financial regulation issues. The organizations' research papers and frequent teleconferences provide valuable updates to the IPERS staff in their effort to maintain a current knowledge of these issues. The other benefit membership provides is a discount on fees to conferences hosted by the Council, including their annual meeting. The annual meeting provides Council members the opportunity to share ideas and listen to thought leaders in the corporate governance and shareholder rights arenas. Finally membership in CII provides a vehicle to monitor the proxy season along with key issues each year. Without this membership, a tool we use at IPERS to fulfill our fiduciary would be lost.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF

THE STATE OF IOWA. Membership in this organization contributes to IPERS' effective management of its \$20 billion portfolio, which in turn reduces the need for increased contributions from IPERS employers. Effective management of IPERS' investment portfolio also eliminates the need for additional taxes to subsidize the System's benefit payments.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION:

Review of CII's monthly and quarterly publications. Occasional special research project, at IPERS request. Provision of CII guest speakers for IPERS Investment Board meetings, and participation in CII member surveys.

Requested by: Donna M. Muelh
(Department Head Signature)

Date: 12-13-2011

Phone: 281-0070

DOM: ☒ **Approval** ☐ **Disapproval**
Signature David J. ...

Date 12/15/11

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

TAB # 15

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: IPERS

NAME OF ORGANIZATION: International Foundation for Retirement Education (InFRE)

NEW MEMBERSHIP ____ **RENEWAL** **X** **MEMBERSHIP PERIOD:** 9/30/2011 -9/30/2012
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$875.00

Funding Other Funds __100 % IPERS Trust Fund

If Renewal, previous year amount. \$ 775.00

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? Yes No **X** Unknown

If yes, please list:

Please describe why your department should have an additional membership N/A

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? Yes **X** No

If yes, list the anticipated number of trips per year and their purpose Travel is not required for InFRE membership. However, IPERS typically sends two officers to the educational conferences.

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT:

Retirement Benefit Officers learn the needs of retiring members are changing and will continue to change as each year goes by. The purpose of the InFRE membership offers continuing education to the Retirement Benefit Officers that counsel IPERS retirees and will educate them on what communication styles will work to effectively counsel IPERS members on their pension benefit. IPERS encourages Retirement Officers to participate in InFRE Education opportunities. This is available only thru memberships.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

IPERS counselors will have the most current information regarding pension plans and laws. Retirement Benefit Officers will be better able to counsel public employees who are thinking of retirement and help them make an informed decision.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: Quarterly contact with InFRE (International Foundation for Retirement Education) is usually done through newsletter via email. Anyone who is a member will also need to complete 15 hours of continuing education that is offered through various workshops, webcasts, webinars, annual conferences, and on-line self study classes. Members may track and report their continuing education credits on-line through InFRE on an annual basis.

Requested by: <u>Donna Mueller</u> (Department Head Signature)	Date: <u>12-7-2011</u>
Phone: 281-0070	E-mail: <u>donna.mueller@ipers.org</u>
DOM: <u>Approval</u> Disapproval	
Signature <u>Donna Mueller</u>	Date <u>12/13/11</u>

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

TAB # 16

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Iowa Public Employees' Retirement System

NAME OF ORGANIZATION: National Council on Teacher Retirements (NCTR)

NEW MEMBERSHIP ____ **RENEWAL** X **MEMBERSHIP PERIOD:** 1/1/12 - 12/31/12
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$ 3,000.00

Funding Source: Other Fund - 100% IPERS Trust Fund

If Renewal, previous year amount. \$ 2,900.00

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? Unknown

If yes, please list: _____

Please describe why your department should have an additional membership _____

WILL THIS MEMBERSHIP REQUIRE AND PAY FOR OUT-OF-STATE TRAVEL? Yes
If yes, list the anticipated number of trips per year and their purpose:

NCTR offers one or two trips a year, an annual national conference, and an occasional agenda-specific regional meeting. Membership dues increased by \$100; there will be a corresponding decrease in the 2012 Annual Convention registration fee.

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT:

IPERS belongs to this council because over 50 percent of our total membership is school employees. Through NCTR we keep in touch with like public retirement systems.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

Helps us keep current on issues and to anticipate developments and challenges. NCTR's national staff is excellent and plays a key role with other pension groups and Capital Hill.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION:

Monthly mailings, frequent phone contact with Washington DC representatives.

Requested by: <u>Dennis M. Muel</u> (Department Head Signature)	Date: <u>12-13-2011</u>
Phone: 515-281-0070	

DOM: Approval Disapproval

Signature [Signature] **Date** 12/15/11

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Iowa Public Employees' Retirement System (IPERS)

NAME OF ORGANIZATION: National Institute on Retirement Security (NIRS)

NEW MEMBERSHIP ____ **RENEWAL** X **MEMBERSHIP PERIOD:** 1/1/2012-12/31/2012
(Beginning and ending dates)

MEMBERSHIP FEE OR DUES AMOUNT \$5,000.00

Funding Other Funds: 100% IPERS Trust Fund – the Benefits Advisory Committee voted to support this membership and charge it to their standing appropriation. Dues are based on assets under management; growth in Trust Fund assets to \$23 billion placed IPERS in next membership level.
If Renewal, previous year amount: \$2,500.00

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? No

If yes, please list

Please describe why your department should have an additional membership

WILL THIS MEMBERSHIP REQUIRE OUT-OF-STATE TRAVEL? No

If yes, list the anticipated number of trips per year and their purpose:

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT.

The NIRS membership provides an efficient way to get research we need. This organization's sole purpose is to conduct research and education to support the development of sound public policies that enhance retirement security in America. As a member we receive reports for free. It would cost us more to get these reports as a nonmember, and it would cost us much more to conduct similar research and surveys on our own.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

The public interest is served when employers offer affordable, high-quality retirement benefits that help them achieve their human resources goals and employees have a secure source of retirement income that enables them to maintain a decent living standard after a lifetime of work.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: IPERS expects to utilize resources, studies, and experts to improve the long range retirement security of IPERS membership. As a member of NIRS, IPERS will have access to experts in the field of retirement research. This will assist IPERS in providing education to trustees, legislators, members, and the public on the subject of retirement security.

Requested by: <u>Donna Mueller</u> (Department Head Signature)	Date: <u>12-7-2011</u>
Phone: 515-281-0070	E-mail: donna.mueller@ipers.org

DOM: Approval X Disapproval ____

Signature [Signature] **Date** 12/15/11

Executive Council of Iowa

Capitol Building
Des Moines, Iowa 50319
Phone: 515 281-5368
FAX: 515 281-7562

TAB # 18

RECEIVED

DEC 27 2011

IOWA DEPT. OF
MANAGEMENT

REQUEST FOR MEMBERSHIP APPROVAL

DEPARTMENT REQUESTING MEMBERSHIP: Department of Education/Iowa Vocational Rehabilitation Services

NAME OF ORGANIZATION: Greater Cedar Valley Alliance & Chamber

NEW MEMBERSHIP ____ **RENEWAL** **X** **MEMBERSHIP PERIOD:** 1/1/12 – 12/31/12
(Beginning and ending dates)

MEMBERSHIP ADDITIONAL FUNDS AMOUNT \$60.00. The original invoice was for \$220.00. We incorrectly paid \$160.00. The \$60 for this request is to make up the difference.

Funding Source: State General Fund 21.3% Other State Funds

Federal Funds 78.7% **Other Funds**

If Renewal, previous year amount. \$

DO OTHER DEPARTMENTS BELONG TO THIS ORGANIZATION? **X-Yes** No

If yes, please list: Iowa Workforce Development

Please describe why your department should have an additional membership

- To educate employers as to the benefits of hiring persons with disabilities;
- To establish relationships and partnerships with the business community
- To gain increased access to businesses for our clients seeking employment, and to identify opportunities for them.

WILL THIS MEMBERSHIP REQUIRE OUT-OF-STATE TRAVEL? Yes **X-No**

If yes, list the anticipated number of trips per year and their purpose:

DESCRIBE WHY THIS MEMBERSHIP IS IMPORTANT TO THE WORK OF YOUR DEPARTMENT:
Our local area offices gain access to local business planning. We are able to gain first-hand knowledge about the employment needs of the community and then can prepare our clients to meet those employment needs.

DESCRIBE HOW MEMBERSHIP IN THIS ORGANIZATION WILL BENEFIT THE TAXPAYERS OF THE STATE OF IOWA.

- Increase our access to business and understanding of Iowa business' needs.
- Strengthens our public/private partnerships.
- Creates opportunities for education of employers.
- Gains access to more employment opportunities for IVRS clients.

DESCRIBE THE FREQUENCY AND TYPE OF CONTACTS YOU EXPECT YOUR DEPARTMENT TO HAVE WITH THIS ORGANIZATION: Local membership meetings 1 or 2 a month; plus public education and seminars, job/career fairs, business expose as needed.

Requested by: David S. Mitchell
(Department Head Signature)

Date: 12/22/11

Phone: 515 281-4140

E-mail: David.Mitchell@iowa.gov

DOM: Approval **X** Disapproval ☐

David S. Mitchell 12/27/11